

BAKER BOTTS LLP.31920-PCT-USA
(072900.0107)
PATENT**OFFICIAL**30 Rockefeller Plaza
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UNITED STATES PATENT & TRADEMARK OFFICE
FACSIMILE COVER SHEET

Date: March 19, 2004

Fax Number:.....703-872-9306 (TC1600 - Before Final)

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Attn: GROUP 1600 (Examiner Bridget E. Bunner)

Group Art Unit: 1647

Examiner Phone Number: 571-272-0881

Applicants: Tarro et al.

Application No.: 09/125,122 filed January 4, 1999

For: PHARMACEUTICAL COMPOSITIONS COMPRISING NATURAL
HUMAN ALPHA-INTERFERON**CERTIFICATE OF FACSIMILE TRANSMISSION**I hereby certify that this paper for Application No. 09/125,122 is being facsimile
transmitted to the Patent and Trademark Office on the date indicated below.Peter J. Shen
Attorney Name

Signature

52,217
PTO Reg. No.March 19, 2004
DateAttorney Docket No.: 31920-PCT-USA
Atty.: 06024

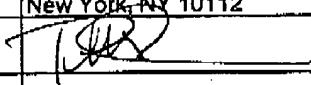
Billing Code: 072900.0107

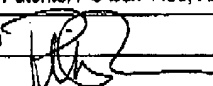
NY02:479390.1

BAKER BOTTS LLPPlease type a plus sign (+) inside this box → **+**

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/125,122
	Filing Date	1/4/1999
	First Named Inventor	Tarro
	Group Art Unit	1647
	Examiner Name	Bunner, Bridget E.
	Attorney Docket Number	A31920-PCT-USA
Total Number of Pages in This Submission		

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
Remarks <input type="checkbox"/>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112
Signature	 Att Name: Peter J. Shen PTO Reg: 52,217
Date	March 19, 2004

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on this date: March 19, 2004	
Typed or printed name	Peter J. Shen 
Signature	Date March 19, 2004

BAKER BOTTS LLP

Attorney Docket Number: A31920-PCT-USA

Title: PHARMACEUTICAL COMPOSITIONS COMPRISING NATURAL HUMAN ALPHA-INTERFERON

Use Space Below for Additional Information:

BAKER BOTTS LLP**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 420**Complete if Known**

Application Number	09/125,122
Filing Date	1/4/1999
First Named Inventor	Tarro
Examiner Name	Bunner, Bridget E.
Art Unit	1647
Attorney Docket No.	A31920-PCT-USA

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit Account Number
Deposit Account Name

02-4377

Baker Botts LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments☐ Charge any additional fee required under 37CFR 1.16 and 1.17☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$) 0**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	- 20 = 0	X	0
Multiple Dependent	- 3 = 0	X	0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	420
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 630	2503 315	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 420**SUBMITTED BY**

Name (Print/Type)

Peter J. Shen

Signature

Registration No.
(Attorney/Agent)

52,217

(Complete if applicable)

Telephone 212-408-2595

Date

March 19, 2004

BAKER BOTTS L.L.P.Atty. Docket No. 31920-PCT-USA (072900.0107)
PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

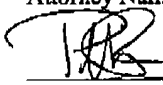
Applicants : Tarro et al.
Appln. No. : 09/125,122 Examiner : Bunner, Bridget E.
Filed : January 4, 1999 Group Art Unit: 1647
For : PHARMACEUTICAL COMPOSITIONS COMPRISING
NATURAL HUMAN ALPHA-INTERFERON

REPLY UNDER 37 C.F.R. § 1.111

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Technology Center 1600 at 703-872-9306 on March 19, 2004.

Peter J. Shen
Attorney Name

52,217
PTO Registration No.


Signature

March 19, 2004
Date of Signature

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the non-final Office Action dated October 31, 2003,

Applicants submit this Reply. Authorization of a two-month extension fee is enclosed herewith. No other fee is believed to be due in connection with this Reply. However, should an additional fee be required in connection with this Reply, the Commissioner is hereby authorized to charge any such fee to Deposit Account No. 02-4377. Any required extension of time is hereby requested. A duplicate copy of this sheet is enclosed.

NY02:479369.1

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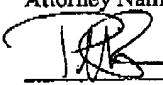
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